

COMBINED  
NOV 22 2004  
In Re Application

NTV 2 2 2004

20518/54 (S-8492-1)

In Re Application Of: **Barrus et al.**

Application No. 10/659,131	Filing Date 09/10/2003	Examiner Williams, Catherine Serke	Customer No. 21710	Group Art Unit 3763	Confirmation No. 3557
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Invention: **SAFETY SHIELD FOR MEDICAL NEEDLES**

COMMISSIONER FOR PATENTS:

This is a combined amendment and petition under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of July 22, 2004 in the above-identified application.

The requested extension is as follows (check time period desired):

☒ One month      ☐ Two months      ☐ Three months      ☐ Four months      ☐ Five months

from: October 22, 2004      until: November 22, 2004  
Date Date

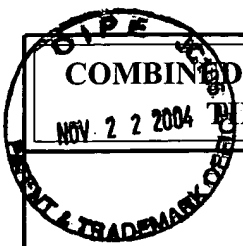
The fee for the amendment and extension of time has been calculated as shown below:

## CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21 -	20 =	1	x \$18.00	\$18.00
INDEP. CLAIMS	3 -	3 =	0	x \$88.00	\$0.00
FEE FOR AMENDMENT					\$18.00
FEE FOR EXTENSION OF TIME					\$110.00
TOTAL FEE FOR AMENDMENT AND EXTENSION OF TIME					\$128.00

11/23/2004 EAREGAY1 00000019 500369 10659131

02 HC:1251 110.00 DA



**COMBINED AMENDMENT & PETITION FOR EXTENSION OF  
TIME UNDER 37 CFR 1.136(a) (Large Entity)**

Docket No.  
20518/54 (S-8492-1)

The fee for the amendment and extension of time is to be paid as follows:

- ☐ A check in the amount of \_\_\_\_\_ for the amendment and extension of time is enclosed.
- ☒ Please charge Deposit Account No. **500369** in the amount of **\$128.00**
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **500369**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 CFR 1.17.
- ☒ If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. \_\_\_\_\_
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

*Signature*

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Dated: Nov. 17, 2004

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

11/17/04  
(Date)

*Signature of Person Mailing Correspondence*

**Michelle A. Aiello**

*Typed or Printed Name of Person Mailing Correspondence*

cc: